

11/04/98

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PTO/SB/50 (12-97)

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## REISSUE PATENT APPLICATION TRANSMITTAL

**Address to:**

**Assistant Commissioner for Patents**  
**Box Patent Application**  
**Washington, DC 20231**

<i>Attorney Docket No.</i>	30566.57USRE
<i>First Named Inventor</i>	Brian D. Gantz
<i>Original Patent Number</i>	5,572,639
<i>Original Patent Issue Date (Month/Day/Year)</i>	November 5, 1996
<i>Express Mail Label No.</i>	EL140907958US
<i>Total Pages</i>	86

**APPLICATION FOR REISSUE OF:**  
(check applicable box)

X

### Utility Patent

7

### Design Patent

7

### Plant Patent

## APPLICATION ELEMENTS

1. ☒ Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Specification and Claims (amended, if appropriate)
3. ☒ Drawing(s) (proposed amendments, if appropriate)
4. ☒ Reissue Oath / Declaration (original or copy)  
(37 CFR 1.175)(PTO/SB/51 or 52)
5. Original U.S. Patent
- ☒ Offer to Surrender Original Patent (37 CFR 1.178)  
(PTO/SB/53 or PTO/SB/54)
- or
- ☒ Ribboned Original Patent Grant
- ☐ Affidavit / Declaration of Loss (PTO/SB/55)
6. Original U.S. Patent currently assigned?
- ☒ Yes ☐ No
- (If Yes, check applicable box(es))
- ☒ Written Consent of all Assignees (PTO/SB/53 or 54)
- ☒ 37 CFR 3.73(b) Statement ☒ Power of Attorney

## ACCOMPANYING APPLICATION PARTS

7. ☒ Transfer drawings from Patent File
8. ☐ Foreign Priority Claim (*35 USC 119*)  
(*if applicable*)
9. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
10. ☐ English Translation of Reissue Oath/Declaration  
(*if applicable*)
11. ☐ Small Entity ☐ Statement filed in prior application,  
Statement(s) Status still proper and desired
12. ☒ Preliminary Amendment
13. ☒ Return Receipt Postcard (*MPEP 503*)  
(*Should be specifically itemized*)
14. ☒ Other: Check No. 1371 for \$2372.  
to cover Reissue filing fee.

### 15. CORRESPONDENCE ADDRESS

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 30566.57USRE <u>09/18670</u>		
Claims as Filed - Part 1								
Claims in Patent	For	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 24	Total Claims (37 CFR 1.16(j))	(B) 81	**** 57 =	x \$	=	or	x \$22 = \$ 1254.00	
(C) 3	Independent Claims (37 CFR 1.16(i))	(D) 7	* 4 =	x \$	=		x \$82 = \$ 328.00	
Basic Fee (37 CFR 1.16(h))					\$		\$ 790.00	
Total Filing Fee					\$	OR	\$ 2372.00	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	=	x \$	=	or	x \$ =
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$	=		x \$ =
Total Additional Fee					\$	OR	\$	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p>								
<p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p>A duplicate copy of this sheet is enclosed.</p>								
<p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>50-0494</u>.</p> <p>A duplicate copy of this sheet is enclosed.</p>								
<p><input checked="" type="checkbox"/> A check in the amount of \$ <u>2372.00</u> to cover the filing / additional fee is enclosed.</p>								
Nov. 4, 1998 Date		 _____ Signature of Applicant, Attorney or Agent of Record						
		George H. Gates _____ Typed or printed name						